

Certifications & Signature

Basic Information

Discount Calculation

Funding Requests

Certifications & Signature

Funding Requests

View Category Two Requests & Bl

Create a Funding Request

What method would you like to use to create your Funding Request?

Step-by-step



Everything on one page

Finished Entering Funding Requests?

If you've entered all of your data, you may go to the next step.

Certify & Submit Your Application

Once we're done entering funding requests, we can certify and submit.

Your Funding Requests			FRN Calculation
	UPS (2717897)	Key Information	Item 21
			\$960.00
	Routers (2717896)	Key Information	Item 21
			\$2,680.00

If you have no additional Funding Requests to create, proceed to the "Certifications and Signature" section.

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int: APPLICANT - 471-2015

Basic Information

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All Kentucky public library outlets qualify for E-rate.



I certify that the entities listed in Block 4 of this application are eligible for support because they are:

libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any schools, including, but not limited to, elementary, secondary schools, colleges, or universities.



Verify that your library will support the costs not covered by E-rate.

I certify that the entity I represent or the entities listed on this application have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that the entities I represent or the entities listed on this application have secured access to all of the resources to pay the discounted charges for eligible services from funds to which access has been secured in the current funding year. I certify that the Billed Entity will pay the non-discount portion of the cost of the goods and services to the service provider(s).

A	Total funding year pre-discount amount on this FCC Form 471	\$10,500.00
B	Total funding commitment request amount on this FCC Form 471	\$7,560.00



A	Total funding year pre-discount amount on this FCC Form 471	\$10,500.00
B	Total funding commitment request amount on this FCC Form 471	\$7,560.00
C	Total applicant non-discount share	\$2,940.00
D	Total budgeted amount allocated to resources not eligible for E-rate support	50000
E	Total amount necessary for the applicant to pay the non-discount share of the services requested on this application AND to secure access to the resource necessary to make effective use of the discounts	\$52,940.00

☒ Check this box if you are receiving any of the funds in Item E directly from a service provider listed on any of the FCC Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the FCC Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Item E.

Enter your annual technology budget here. At a minimum, it should equal the amount listed above in C (Total applicant non-discount share).

This is a way of making sure you're not receiving kickbacks from your service provider. Your application will be flagged if you check this box.



The 28-day waiting period is critical, as is the selection of the most cost-effective bid.

Don't put any E-rate equipment on eBay, accept any gifts from service providers, or let them tell you what to put on the form!

If the rules haven't been followed, you won't receive funding. Also, certify there is a signed contract in place for services that are not tariffed or month-to-month.

Certify that you've followed local, state and FCC procurement rules.

- ☒ certify that an FCC Form 470 was posted and that any related RFP was made available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology goals.
- ☒ certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have complied with them.
- ☒ certify that the services the applicant purchases at discounts provided by 47 U.S.C. § 254 will be used primarily for educational purposes, see 47 C.F.R. § 54.500 and will not be sold, resold or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. §§ 54.500, 54.513. Additionally, I certify that the entity or entities listed on this application have not received anything of value or a promise of anything of value, other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.
- ☒ certify that I and the entity(ies) I represent have complied with all program rules, including recordkeeping requirements, and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments. There are signed contracts or other legally binding agreements covering all of the services listed on this FCC Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.
- ☒ acknowledge that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the service, receive an appropriate share of benefits from those services.
- ☒ certify that I will retain required documents for a period of at least 10 years (or whatever retention period is required by the rules in effect at the time of this certification) after the last day of service delivered. I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the application for, receipt of, and delivery of services receiving schools and libraries discounts, and that if audited, I will make such records available to the Administrator. I acknowledge that I may be audited pursuant to participation in the schools and libraries program.

The program exists to benefit the most disadvantaged libraries and schools.

A reminder to retain your documents for 10 years after the last day of service, and notice that you could be audited.

Certify that you're not a rogue agent, filing this form without knowledge of the services needed by the library, and that all information is correct to the best of your knowledge.

If fraud is knowingly committed, the FCC will suspend or debar the perpetrator from the program and publish their name so that no service providers will work with them.

- ☒ I certify that I am authorized to order telecommunications and other supported services for the eligible entity(ies) listed on this application. I certify that I am authorized to submit this request on behalf of the eligible entity(ies) listed on this application, that I have examined this request, that all of the information on this form is true and correct to the best of my knowledge, that the entities that are receiving discounts pursuant to this application have complied with the terms, conditions and purposes of the program, that no kickbacks were paid to anyone and that false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001 and civil violations of the False Claims Act.
- ☒ I acknowledge that FCC rules provide that persons who have been convicted of criminal violations or held civilly liable for certain acts arising from their participation in the schools and libraries support mechanism are subject to suspension and debarment from the program. I will institute reasonable measures to be informed, and will notify USAC should I be informed or become aware that I or any of the entities listed on this application, or any person associated in any way with my entity and/or the entities listed on this application, is convicted of a criminal violation or held civilly liable for acts arising from their participation in the schools and libraries support mechanism.
- ☒ I certify that if any of the Funding Requests on this FCC Form 471 are for discounts for products or services that contain both eligible and ineligible components, that I have allocated the eligible and ineligible components as required by the Commission's rules at 47 C.F.R. § 54.504(g)(1), (2).
- ☒ I certify that the non-discount portion of the costs for eligible services will not be paid by the service provider. The pre-discount costs of eligible services featured on this FCC Form 471 are net of any rebates or discounts offered by the service provider. I acknowledge that, for the purpose of this rule, the provision, by the provider of a supported service, of free services or products unrelated to the supported service or product constitutes a rebate of some or all of the cost of the supported services.

Certify that you've completed a [cost allocation process](#) and are not requesting ineligible services or equipment.

Libraries are responsible for the portion of the cost not covered by E-rate discounts. Accepting free stuff from service providers is prohibited unless it's also available to the general public (a free cell phone, for example).

Authorized Person ⓘ

Is the authorized person the primary contact named earlier as Katherine Adelberg?

☒ Yes ☐ No

They may not be the same as the primary contact person.

Name of authorized person

Katherine Adelberg

Street address, P.O. Box or Route Number of authorized person (1)

2000 L ST NW

Street address, P.O. Box or Route Number of authorized person (2)

SUITE 200

City of authorized person **State** **Zip code of authorized person**

WASHINGTON DC 20036

Telephone number **Ext.**

(202)776-0200



Submit & Certify Your Application

1. Review Application

Review this application to ensure it is complete and accurate.

[Review Application](#)

This will be your only option; you must review before submitting.

2. Submit Application

After you submit this application, it can't be changed.

[Submit Application](#)

3. Certify

All applications must be certified in order to be processed.

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Review Application

Please review this application for completeness and accuracy. Issues such as missing information or mathematical errors are highlighted in red. You may resolve any issue by clicking on it.

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Expand the categories by clicking the +. Print a copy for your records using the printer icon.

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[Submit Application](#)

Now you'll be able to submit.

3. Certify

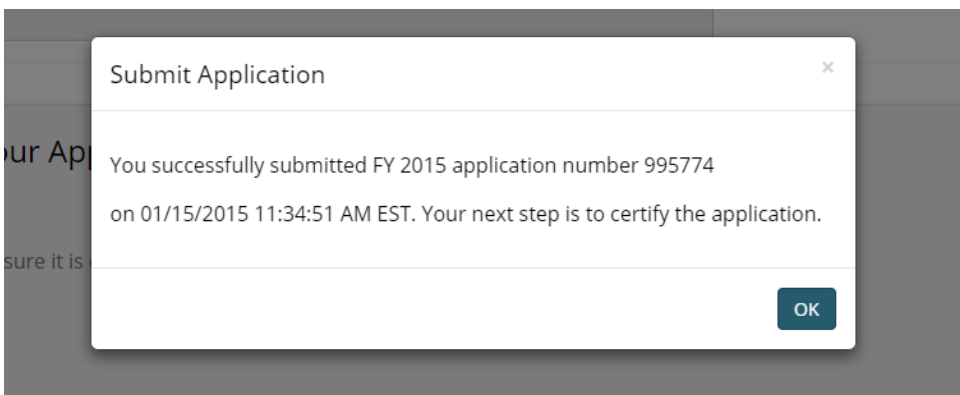
All applications must be certified in order to be processed.

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Choose this option if you have a PIN number.

3. Certify

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If you can't find your PIN or don't have one, choose paper certification and mail or fax in the signed pages.



Authorized Person's Name:Katherine Adelberg

Title/Position:

Address:

2000 L ST NW

SUITE 200

WASHINGTON, DC 20036

Phone:(202) 776-0200

Fax:(202) 776-0080

Email:katherine.adelberg@ky.gov

Employer:APPLICANT

Enter your PIN and check to confirm your compliance.

☒ I understand that the use of a PIN is equivalent to a handwritten signature

Enter your PIN

[Certify with PIN](#)

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You should receive a message that your form has been successfully certified. If an error message comes up instead, go back to the [Apply Online page](#) and choose Form 471 2015 and Certify.

